

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

ORRINPAC

ADDRESS (number and street)

175 S. WEST TEMPLE, SUITE 650

☐Check if different
than previously
reported. (ACC)

SALT LAKE CITY

UT

84101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00235572

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☒

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

03

01

2007

through

03

31

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

STANLEY R. DE WAAL

Signature of Treasurer

Electronically Filed by STANLEY R. DE WAAL

Date

04

11

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
ORRINPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	3	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		70096.10
(b) Cash on Hand at Beginning of Reporting Period	74620.93	
(c) Total Receipts (from Line 19)	84550.00	99550.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	159170.93	169646.10
7. Total Disbursements (from Line 31)	55076.00	65551.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	104094.93	104094.93
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
 ORRINPAC

Report Covering the Period:

From:

M M D D Y Y W Y
 0 3 0 1 2 0 0 7

To:

M M D D Y Y W Y
 0 3 3 1 2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	76950.00	91950.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	77050.00	92050.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	7500.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	84550.00	99550.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	84550.00	99550.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	84550.00	99550.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8076.00	13551.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	8076.00	13551.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45000.00	50000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	2000.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	55076.00	65551.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	55076.00	65551.17

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	84550.00	99550.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84550.00	99550.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8076.00	13551.17
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8076.00	13551.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. THOMAS BALDWIN

Mailing Address 340 TURTLEBACK ROAD

City State Zip Code
 NEW CANAAN CT 06840

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORTONS RESTAURANT GROUP

Occupation
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1653

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

B. RAND A. BALLARD

Mailing Address 2455 EAGLERIDGE LANE W

City State Zip Code
 CORDOVA TN 38016-4639

FEC ID number of contributing
federal political committee.

C

Name of Employer
MED ASSETS

Occupation
COO & CCO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 0 8 / 2 0 0 7

Transaction ID: 70319.C1651

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

C. RAND A. BALLARD

Mailing Address 2455 EAGLERIDGE LANE W

City State Zip Code
 CORDOVA TN 38016-4639

FEC ID number of contributing
federal political committee.

C

Name of Employer
MED ASSETS

Occupation
COO & CCO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1655

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)

MARTIN H. BAUMAN

Mailing Address 12 EAST ROAD

City State Zip Code
 PORT WASHINGTON NY 11050

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAUMAN & ASSOCIATES

Occupation
EXECUTIVE RECRUITING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1656

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

ALLEN J. BERNSTEIN

Mailing Address 3333 NEW HYDE PARK RD, STE 210

City State Zip Code
 NEW HYDE PARK NY 11042

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORTONS RESTAURANT GROUP

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1657

Amount of Each Receipt this Period

1500.00

Receipt

C. Full Name (Last, First, Middle Initial)

WILLIAM W. BLODGETT

Mailing Address 1426 NORTH OCEAN BLVD.
 P. O. BOX 44

City State Zip Code
 PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOLLAND PUMPS

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1658

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)
 MARTA BOTMASIAN
 Mailing Address 215 N. FEDERAL HWY

City State Zip Code
 BOCA RATON FL 33432

FEC ID number of contributing federal political committee.

C

Name of Employer Information Requested

Occupation Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1659

Amount of Each Receipt this Period

2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
 JOHN J. BROGAN
 Mailing Address 100 N. FLAGLER DR, APT. 1906

City State Zip Code
 WEST PALM BEACH FL 33401

FEC ID number of contributing federal political committee.

C

Name of Employer N/A

Occupation RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1660

Amount of Each Receipt this Period

3000.00

Receipt

C. Full Name (Last, First, Middle Initial)
 JOHN M. BUTTINE
 Mailing Address 20 EAST 35TH STREET, 2LM

City State Zip Code
 NEW YORK NY 10016

FEC ID number of contributing federal political committee.

C

Name of Employer JOHN BUTTINE, INC.

Occupation INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1661

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)
KATHY D. CASH

Mailing Address 3559 SPRING VALLEY CT

City State Zip Code
BIRMINGHAM AL 35223

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRINCIPLE SHARING GROUP
INC.Occupation
INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	7

Transaction ID: 70410.C1662

Amount of Each Receipt this Period

1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
JOHN K. CASTLE

Mailing Address 1095 N. OCEAN BLVD

City State Zip Code
PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
CASTLE HARLAN, INC.Occupation
MERCHANT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	7

Transaction ID: 70410.C1664

Amount of Each Receipt this Period

5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
MARIANNE S. CASTLE

Mailing Address 1095 N. OCEAN BLVD.

City State Zip Code
PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
HOUSEWIFE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	7

Transaction ID: 70410.C1663

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. RICHARD M. DEVOS

Mailing Address 1720 S. OCEAN BLVD

City

LAKE WORTH

State

FL

Zip Code

33462-6222

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMWAY CORPORATION

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1665

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

B. PETER DUPUIS

Mailing Address 315 CARIBBEAN ROAD

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1666

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

C. MARJORIE S. FISHER

Mailing Address 920 N. LAKE WAY

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
MOSAIC FOUNDATION

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1667

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. PATRICK HENRY FLYNN

Mailing Address 2600 N. FLAGLER DR, #106

City State Zip Code
WEST PALM BEACH FL 33407

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1668

Amount of Each Receipt this Period

250.00

Receipt

Full Name (Last, First, Middle Initial)

B. LISA GERARD

Mailing Address 128 ELLAMAR RD

City State Zip Code
WEST PALM BEACH FL 33405-4167

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1669

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

C. GARY M. GREEN

Mailing Address 300 WATERSFIELD CT

City State Zip Code
ALPHARETTA GA 30022

FEC ID number of contributing
federal political committee.

C

Name of Employer
MED ASSETS

Occupation
SENIOR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1670

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. MARK GUZZETTA

Mailing Address 2280 QUEEN PALM RD

City State Zip Code
 BOCA RATON FL 33432

FEC ID number of contributing
federal political committee.

C

Name of Employer
GUZZETTA & ASSOCIATES, IN-
C.

Occupation
DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1671

Amount of Each Receipt this Period

2300.00

Receipt

Full Name (Last, First, Middle Initial)

B. ERIC R. HANSON

Mailing Address 4645 HAWTHORNE LN, NW

City State Zip Code
 WASHINGTON DC 20016-3437

FEC ID number of contributing
federal political committee.

C

Name of Employer
U S STRATEGIES CORP.

Occupation
CHAIRMAN & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1672

Amount of Each Receipt this Period

2000.00

Receipt

Full Name (Last, First, Middle Initial)

C. JULIE R. HEBERLEIN

Mailing Address P. O. BOX 789

City State Zip Code
 PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1673

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)

EDWARD L. HENNESSY, JR.

Mailing Address 500 ISLAND DRIVE

City State Zip Code
 PALM BEACH FL 33480-4747

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1674

Amount of Each Receipt this Period

1000.00

Receipt

B. Full Name (Last, First, Middle Initial)

JOHN L. HURLEY

Mailing Address 2196 IBIS ISLE RD, APT 8

City State Zip Code
 PALM BEACH FL 33480-5316

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE GEO GROUP, INC.

Occupation
SR. V.P. - OP. STRATEGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1675

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

MARYANN H. HURLEY

Mailing Address 800 WEST FERRY 1D

City State Zip Code
 BUFFALO NY 14222

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
HOUSEWIFE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1676

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial) GEORGE G. JANIS Mailing Address 26F CONGRESS AVE, #136 City State Zip Code SARATOGA SPRINGS NY 12866 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7 Transaction ID: 70410.C1677 Amount of Each Receipt this Period 1000.00 Receipt
B. Full Name (Last, First, Middle Initial) KAREN KARAMANOUKIAN Mailing Address 151 JACKMAN LANE City State Zip Code ELMA NY 14059 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7 Transaction ID: 70410.C1678 Amount of Each Receipt this Period 1500.00 Receipt
C. Full Name (Last, First, Middle Initial) RICHARD L. KRZYZANOWSKI Mailing Address 466 WYNDMOOR VALLEYSEA WINDS - SIN City State Zip Code HUNTINGDON VALLEY PA 19006 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7 Transaction ID: 70410.C1679 Amount of Each Receipt this Period 500.00 Receipt

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. ALAN LEBOW

Mailing Address 272 VIA MARILA

City State Zip Code
 PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1680

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

B. CAROLE LEDER

Mailing Address 16456 BRAEBURN RIDGE TRL

City State Zip Code
 DELRAY BEACH FL 33446

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1681

Amount of Each Receipt this Period

2300.00

Receipt

Full Name (Last, First, Middle Initial)

C. LAWRENCE LEDER

Mailing Address 929 CLINT MOORE ROAD

City State Zip Code
 BOCA RATON FL 33487

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROMISE HEALTH CARE

Occupation
C.F.O.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1683

Amount of Each Receipt this Period

2300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)
RICHARD LUNA
Mailing Address 2190 FALCON WAY

City State Zip Code
SANDY UT 84093-2658

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1682

Amount of Each Receipt this Period

2300.00

Receipt

B. Full Name (Last, First, Middle Initial)
JULIE MARQUES
Mailing Address 9420 SOUTH 300 EAST

City State Zip Code
SANDY UT 84070

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1684

Amount of Each Receipt this Period

2300.00

Receipt

C. Full Name (Last, First, Middle Initial)
GERTRUDE G. MAXWELL
Mailing Address 1700 S. OCEAN BLVD

City State Zip Code
PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1685

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. JOSEPH McCARTHY

Mailing Address 110 CLARENDON AVENUE

City State Zip Code
 PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1686

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

B. JEFFREY MEILMAN

Mailing Address 811 MAPLE ROAD

City State Zip Code
 BUFFALO NY 14221

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1687

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

C. MALCOLM H. MORRISON

Mailing Address 3418 CANYON CREEK

City State Zip Code
 MECHANICSBURG PA 17055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1688

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)
 RAYMOND PERELMAN
 Mailing Address 1820 RITTENHOUSE SQ

City State Zip Code
 PHILADELPHIA PA 19103

FEC ID number of contributing
federal political committee.

C

Name of Employer
 BELMONT HOLDINGS

Occupation
 BUSINESS EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1689

Amount of Each Receipt this Period

1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
 LEE H. PERLMAN
 Mailing Address 10 ORSINI DRIVE

City State Zip Code
 LARCHMONT NY 10538-1642

FEC ID number of contributing
federal political committee.

C

Name of Employer
 GNYHA VENTURES

Occupation
 EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 0 8 / 2 0 0 7

Transaction ID: 70319.C1652

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
 WALTER M. ROSS
 Mailing Address 456 WORTH AVENUE

City State Zip Code
 PALM BEACH FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer
 N/A

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1690

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER W. RUDDY

Mailing Address 1120 BEAR ISLAND DR

City State Zip Code
WEST PALM BEACH FL 33409

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEWSMAX MEDIA, INC.

Occupation
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1691

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

B. THOMAS S. SHERWIN

Mailing Address P. O. BOX 2504

City State Zip Code
PALM BEACH FL 33480-4420

FEC ID number of contributing
federal political committee.

C

Name of Employer
C & C FINANCIAL

Occupation
FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1692

Amount of Each Receipt this Period

1500.00

Receipt

Full Name (Last, First, Middle Initial)

C. NED L. SIEGEL

Mailing Address 3656 PRINCETON WAY

City State Zip Code
BOCA RATON FL 33496

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE SIEGEL GROUP

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1693

Amount of Each Receipt this Period

2300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)

STEPHANIE M. SIEGEL

Mailing Address 3656 PRINCETON WAY

City State Zip Code
 BOCA RATON FL 33496

FEC ID number of contributing federal political committee.

C

Name of Employer
N/AOccupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1694

Amount of Each Receipt this Period

2300.00

Receipt

B. Full Name (Last, First, Middle Initial)

DUANE J. STILLER

Mailing Address 2906 BANYON BLVD CIR

City State Zip Code
 BOCA RATON FL 33431-6334

FEC ID number of contributing federal political committee.

C

Name of Employer
WOOLBRIGHT DEVELOPMENT, INC.Occupation
REAL ESTATE DEVELOPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1695

Amount of Each Receipt this Period

2300.00

Receipt

C. Full Name (Last, First, Middle Initial)

GLORIA G. STUART

Mailing Address 129 CLARENDON

City State Zip Code
 PALM BEACH FL 33480

FEC ID number of contributing federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1696

Amount of Each Receipt this Period

2000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. STEPHEN M. SULLIVAN

Mailing Address 1042 CAMELLIA BLVD, STE 2

City State Zip Code
 LAFAYETTE LA 70508

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1697

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

B. GREGORY K. TALBOT

Mailing Address 140 N. FEDERAL HWY, #200

City State Zip Code
 BOCA RATON FL 33432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1698

Amount of Each Receipt this Period

2300.00

Receipt

Full Name (Last, First, Middle Initial)

C. RICHARD W. THALER

Mailing Address 5 LEONARD RD

City State Zip Code
 BRONXVILLE NY 10708-1606

FEC ID number of contributing
federal political committee.

C

Name of Employer
DEUTSCHE BANK SECURITIES,
INC.

Occupation
INVESTMENT BANKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 2 6 / 2 0 0 7

Transaction ID: 70410.C1699

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial) ANDRE WEISS		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7	
Mailing Address 20 TRENOR DRIVE		Transaction ID: 70410.C1700	
City WYKAGYL	State NY	Zip Code 10804-3717	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer SCHULTE ROTH & ZABEL LLP	Occupation ATTORNEY	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) BRIAN F. WRUBLE		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 6 / 2 0 0 7	
Mailing Address 318 WEST 78TH STREET		Transaction ID: 70410.C1701	
City NEW YORK	State NY	Zip Code 10024-6503	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer OPPENHEIMER QUEST CAPITAL VALU	Occupation DIRECTOR	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

76950.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 28

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A. Full Name (Last, First, Middle Initial)

Premier Employees Civic Action Fund

Mailing Address 444 N. Capitol Steet, NW, Ste 625

City	State	Zip Code
WASHINGTON	DC	20001-1511

FEC ID number of contributing
federal political committee. **C** C00346288

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3		3 0		2 0 0 7

Transaction ID: 70410.C1702

Amount of Each Receipt this Period

5000.00

Receipt

B. Full Name (Last, First, Middle Initial)

VHA PAC

Mailing Address 220 E. Las Colinas Blvd

City	State	Zip Code
IRVING	TX	75039-5500

FEC ID number of contributing
federal political committee. **C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3		3 0		2 0 0 7

Transaction ID: 70410.C1703

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

7500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ORRINPAC

Full Name (Last, First, Middle Initial)
A. NATIONAL POLITICAL ASSOCIATES

Mailing Address P.O. BOX 2204

City WASHINGTON State DC Zip Code 20013-

Purpose of Disbursement
FUNDRAISER CONSULTING AND POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70410.E1620

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

4037.00

FUNDRAISER CONSULTING AND
POSTAGE

Full Name (Last, First, Middle Initial)
B. NATIONAL POLITICAL ASSOCIATES

Mailing Address P.O. BOX 2204

City WASHINGTON State DC Zip Code 20013-

Purpose of Disbursement
FUNDRAISER CONSULTING AND POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70410.E1621

Date of Disbursement

03 / 23 / 2007

Amount of Each Disbursement this Period

4039.00

FUNDRAISER CONSULTING AND
POSTAGE

SUBTOTAL of Disbursements This Page (optional) ►

8076.00

TOTAL This Period (last page this line number only) ►

8076.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ORRINPAC

Full Name (Last, First, Middle Initial)

A. CHAMBLISS FOR SENATE

Mailing Address P.O. BOX 14269

City ATLANTA State GA Zip Code 30355-

Purpose of Disbursement
CONTRIBUTION TO PRIMARY

Candidate Name
JAMES DEWARD CHAMBLISS

Office Sought: ☒ House
☐ Senate
☐ President

State: AL District: 07

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70410.E1613

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

Full Name (Last, First, Middle Initial)

B. COLLINS FOR SENATE

Mailing Address P.O. BOX 35

City JONESBORO State GA Zip Code 30237-

Purpose of Disbursement
CONTRIBUTION TO PRIMARY

Candidate Name
MICHAEL A COLLINS

Office Sought: ☒ House
☐ Senate
☐ President

State: GA District: 08

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70410.E1615

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

Full Name (Last, First, Middle Initial)

C. Coleman for Senate 08

Mailing Address 7300 Hudson Blvd #270A

City SAINT PAUL State MN Zip Code 55128-

Purpose of Disbursement
CONTRIBUTION TO PRIMARY

Candidate Name
NORM COLEMAN

Office Sought: ☐ House
☒ Senate
☐ President

State: MN District: 00

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 70410.E1614

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 ORRINPAC

Full Name (Last, First, Middle Initial)

A. GORDON SMITH FOR US SENATE 2002, INC.

Mailing Address 228 S. WASHINGTON ST., STE 200

City ALEXANDRIA State VA Zip Code 22314-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 GORDON HAROLD SMITH

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 00

Transaction ID: 70410.E1616

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

Full Name (Last, First, Middle Initial)

B. GORDON SMITH FOR US SENATE 2002, INC.

Mailing Address 228 S. WASHINGTON ST., STE 200

City ALEXANDRIA State VA Zip Code 22314-

Purpose of Disbursement
 CONTRIBUTION TO GENERAL

Candidate Name
 GORDON HAROLD SMITH

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 00

Transaction ID: 70410.E1617

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO GENERAL

Full Name (Last, First, Middle Initial)

C. LINDSEY GRAHAM FOR SENATE

Mailing Address P.O. BOX 1155

City SENECA State SC Zip Code 29679-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 LINDSEY OLIN GRAHAM

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: SC District: 00

Transaction ID: 70410.E1618

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 ORRINPAC

A. Full Name (Last, First, Middle Initial)
 PAT ROBERTS FOR SENATE

Mailing Address BOX 433

City State Zip Code
 GREAT BEND KS 67530-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 PAT ROBERTS

Category/
 Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 00

Transaction ID: 70410.E1622

Date of Disbursement

M M / D D / Y Y Y Y
 03 23 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

B. Full Name (Last, First, Middle Initial)
 Senator Elizabeth Dole Committee

Mailing Address P. O. BOX 2918

City State Zip Code
 RALEIGH NC 27602-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 ELIZABETH DOLE

Category/
 Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: NC District: 00

Transaction ID: 70410.E1624

Date of Disbursement

M M / D D / Y Y Y Y
 03 15 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

C. Full Name (Last, First, Middle Initial)
 Team Sununu

Mailing Address PO BOX 500

City State Zip Code
 RYE NH 03870-

Purpose of Disbursement
 CONTRIBUTION TO PRIMARY

Candidate Name
 JOHN E SUNUNU

Category/
 Type

Office Sought: ☐ House ☒ Senate ☐ President
 Disbursement For: 2008 ☒ Primary ☐ General
☐ Other (specify) ▼

State: NH District: 00

Transaction ID: 70410.E1625

Date of Disbursement

M M / D D / Y Y Y Y
 03 19 2007

Amount of Each Disbursement this Period

5000.00

CONTRIBUTION TO PRIMARY

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

45000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. LOHRA MILLER FOR DISTRICT ATTORNEY

Mailing Address 2461 WEST JORDAN MEADOWS LANE

City
WEST JORDANState
UTZip Code
84084-Purpose of Disbursement
CONTRIBUTION TO STATE CANDIDATE

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70410.E1619

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	0	7

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00